Priority setting

FOR THE COMPREHENSIVE PLANNING COMMITTEE 2025 PRIORITY SETTING PROCESS

What is Priority Setting.. And Why?

DEFINITION:

Priority setting is the DATA-DRIVEN process of ranking ALL service categories in order of importance, helping to guide the council's work



PURPOSE:

- ✓ To Identify Essential Services: Determining which HIV services are most crucial to ensure that funding is directed toward areas of greatest need
- To Guide Resource Allocation: Informing how funds should be distributed across prioritized services
- ✓ To Support the Continuum of Care: Ensuring engagement in care, retention in care, and viral suppression for people living with HIV (PLWH)
- ✓ **To Fulfill Federal Requirements** for Ryan White Part A funding

RW PART A CORE SERVICES

- 1. AIDS Drug Assistance Program (ADAP)
- 2. Ambulatory Care
- 3. Case Management (medical)
- 4. Early Intervention Services
- 5. Benefits Assistance (HIPCP)
- 6. Home & Community-Based Health Services
- 7. Home Health Care
- 8. Hospice Services
- *9. LPAP*
- 10. Mental Health Therapy/Counseling
- **11.** Nutritional Services
- 12. Oral Health Care
- **13.** Substance Abuse Treatment (Outpatient)

RW PART A SUPPORT SERVICES

- 1. Care Outreach
- 2. Case Management (non-medical)
- 3. Child Care Services
- 4. Day or Respite Care
- 5. Emergency Financial Assistance
- 6. Food Bank/Home-Delivered Meals
- 7. Health Education Risk Reduction
- 8. Housing Assistance
- 9. Referral for Health Care & Support Services
- 10. Other Professional Services/Legal Services
- 11. Psychosocial Support Services
- 12. Rehabilitation Care
- 13. Substance Abuse (Residential)
- 14. Translation & Interpretation
- **15.** Transportation

Italicized/bolded services are currently funded by Ryan White Part A

What Else To Note?

WHEN: While the Priority Setting Process has typically been every three years (or sooner if needed), we anticipate a yearly process according to Ryan White Part A Manual

> Allocations/funding does NOT guide Priority Setting

Data-Driven Ranking:

>CSU (Client Services Unit)

>MMP (Medical Monitoring Project)

Consumer Survey

★COMMUNITY VOICES

Client Services Unit (CSU)

Health Information Helpline

- **★ EMA-Wide service need of (1,837 PLWH) at intake (2023)**
- Key point of entry for MCM
- Scheduling medical appointments for those newly diagnosed, lost to care, and relocating to the EMA
- Provides information and referral services for all other DHH-funded programs
- Processes grievances about funded services



Medical Monitoring Project (MMP)

* Unmet Service Need of (51,419) PLWH in care in Philadelphia (weighted 2020-2022)



 Population-based surveillance system
 Through eHARS case surveillance database to create MMP sample
 Detailed survey including:

- Direct Contact: Anonymous
 - 45 60 minute survey
- Indirect Contact: Medical record abstraction (MRA)

Consumer Survey (2021-2022)

* EMA-Wide data on percentage of (236) PLWH who "needed but didn't get" a service in the last 12 months

Service access:

- 1. Never personally needed the service
- 2. Personally needed service & received it
- 3. Personally needed service & did not receive it
- 4. Never heard of this service

> Online and hardcopy survey, mainly distributed by providers

Ranking for CSU/MMP/Consumer Survey

1 - This is the lowest rating which signifies there is either no mention of the service or that it deviates -0.5 or more below the average.

3- This rating signifies a medium, or average priority. It should be prioritized as much as any other service. That is why these services are right around the average, deviating 0.3 at most from the average.

5- This rating signifies that a service is definitely needed by clients to ensure proper care. That is why these services are well above the average, deviating at most 1.3 from the average.

8- This rating signifies that a service is critical to client care. That is why these services far exceed the average, deviating at least 1.4 from the average.

Please refer to service priority worksheet for more information on proposed ranking

Determining Final Ranking



COMMUNITY VOICES (current):

This factor seeks to quantify community experience/expertise of delivering and receiving HIV services in relationship to emergent needs and issues, vulnerable populations, community knowledge, and other EMA data.

- 1- This service is important to ensure engagement in care, retention in care and/or viral suppression
- 5- This service is needed to ensure engagement in care, retention in care, and/or viral suppression
- 8- This service is critical to ensure engagement in care, retention in care and viral suppression

Data Helping Community Voices:

- **★ Epidemiological Infographics / 2023 Update**
- Care Continuum Data
 Consumer Survey Findings
 Medicaid/Medicare Data
 Service Program Guidance
 Recipient Considerations
 Lambda 2025 Threat Talk



- Negotiation of Priority Ranking Process -

FOR <u>CSU/MMP/CONSUMER SURVEY</u> & <u>COMMUNITY VOICES PORTIONS</u>